APPLICATION FOR	2. DATE SUBMITTED	Applicant Identifier
FEDERAL ASSISTANCE	2. DATE SODWITTED	Applicant Identifier
	July 07, 2010	
1. TYPE OF SUBMISSION	3. DATE RECEIVED BY STATE	State Application Identifier
Application Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier
5.APPLICANT INFORMATION		
Legal Name	Organizational Unit	
City of Woodburn		Police Department
Address  1060 Mount Hood Avenue Woodburn, Oregon 97071-9059		Name and telephone number of the person to be contacted on matters involving this application
77071-9037		Marr, Nita (503) 982-2359
6. EMPLOYER IDENTIFICATION NUMBER (EIN)		7. TYPE OF APPLICANT
93-6002282		Municipal
8. TYPE OF APPLICATION		9. NAME OF FEDERAL AGENCY
New		Bureau of Justice Assistance
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT
NUMBER: 16.738  CFDA EDWARD BYRNE MEMORIAL JUSTICE TITLE: ASSISTANCE GRANT PROGRAM		Evidence Collection and Crime Scene Management
12. AREAS AFFECTED BY PRO	DJECT	-
City of Woodburn, Oregon and su	rrounding Law Enforcement A	gencies
13. PROPOSED PROJECT	14. CONGRESSIONAL	
Start Date: October 01, 2010		DISTRICTS OF
End Date: February 01, 2011		a. Applicant b. Project OR05
15. ESTIMATED FUNDING		16. IS APPLICATION
Federal	\$13,609	SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER
Applicant	\$0	12372 PROCESS?
State	\$0	Program is not covered by E.O.

Local	\$0	12372
Other	\$0	
Program Income	\$0	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?
TOTAL	\$13,609	TEDERAL DEDT!
		N

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS REQUIRED.

Close Window